PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/764,645			ing Date 24/2 00 4	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	T .	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	_	N/A	LD NO.	N/A		N/A	TLE (0)	i	N/A	TLE (0)	
┢	SEARCH FEE	JT (C))	N/A		N/A		N/A		1	N/A	i e	
H	(37 CFR 1.16(k), (i), (ii)		N/A	_	N/A		N/A		ł	N/A		
	(37 CFR 1.16(o), (p), (FAL CLAIMS	(p) 10	minus 20 =				x \$ =		OR	x s =		
INE	CFR 1.16(i)) EPENDENT CLAIM	s	minus 3 = *				x s =		l on	x s =		
(37	CFR 1.16(h))	If the	If the specification and dra		drawings exceed 100				ł			
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 :	n size fee due								
	MULTIPLE DEPEN	7 CFR 1.16(j))	1			1						
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL		
APPLICATION AS AMENDED – PART II OTHER TI (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL										ER THAN		
AMENDMENT		CLAIMS			, ,		OWALL LIVITI		OI.	T OWN	T CONTIN	
	05/12/2008	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18(i))	* 25	Minus	+ 25	= 0]	x \$ =		OR	X \$50=	0	
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	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT	06/26/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.1601)	· 25	Minus	·· 25	= 0	1	x \$ =		OR	X \$50 =	0	
	Independent (37 CFR 1.16(h))	* 5	Minus	*** 5	= 0]	x \$ =		OR	X \$210 =	0	
ä	Application Size Fee (37 CFR 1.16(s))]			1			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
" If the entry in column 1 is less than the entry in column 2, write '70' in column 3. " If the "Highest Number Previously Paid For 'N THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For "(Total or Independent) is the highest number found in the appropriate box in column 1.												

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